

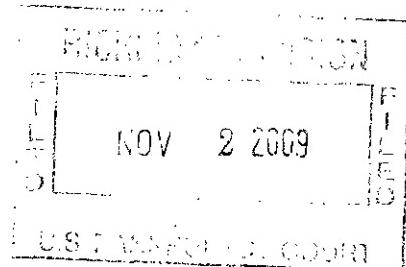
UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
RICHMOND DIVISION

Case No.: 08-353653
Chapter 11

In the Matter of:

CIRCUIT CITY STORES, INC.

Debtor



REQUEST FOR ISSUANCE OF NOTICE OF TRANSFER OF CLAIM

TO THE CLERK OF THE UNITED STATES BANKRUPTCY COURT

PLEASE ISSUE the required notice to the Original Creditor identified below that all right, title and interest in and to the following claim has been transferred:

1. Person or entity to whom the claim has been transferred ("Substitute Creditor")
Name: Donald L. Emerick, Sr.
Address: 555 Park Estates Square
Venice, FL 34293
2. Date of Transfer of Claim: October 30, 2009
3. Type of Claim: Unsecured
4. Amount of Claim: \$1,804,842.10
5. Date of Filing Proof of Claim: April 13, 2009
6. Claims Docket Number: 12218
7. Date of Transfer of Claim: October 30, 2009

(continued on following page)

8. Person or entity who filed the claim ("Original Creditor"):

Name: Citrus Park CC, LLC
Address: Attn: Don Emerick
555 Park Estates Square
Venice, FL 34293

9. Attorney (if any) for Original Creditor, as set forth on Proof of Claim:

Name: Not Applicable
Address:

10. A true and correct copy of the Proof of Claim originally filed is attached hereto as "Exhibit A". True and correct copy of the document evidencing the transfer of the claim is attached as "Exhibit B" (aforementioned Exhibit A is not reattached to reduce length of this document).

Dated: October 30th, 2009.

SUBSTITUTE CREDITOR

By: 
Donald L. Emerick, Sr.

United States Bankruptcy Court <u>EASTERN</u> District of <u>VIRGINIA</u>		PROOF OF CLAIM		
Name of Debtor <i>Circuit City Stores, Inc.</i>	Case Number <i>08-353653</i>			
Note: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.				
Name of Creditor (The person or other entity to whom the debtor owes money or property): <i>Citrus Park CC, LLC</i>	<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. <small>Attach copy of statement giving particulars.</small>			
Name and address where notices should be sent <i>Citrus Park CC, LLC Attn: Don Emerick 555 Park Estates Square Venice, FL 34293</i> Telephone number: <i>941-493-8721</i>	<input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.			
This space is for Court Use Only				
Account or other number by which creditor identifies debtor: <i>Store 3269</i>	Check here <input type="checkbox"/> replaces a previously filed claim, dated: if this claim <input type="checkbox"/> amends _____			
1. Basis for Claim	<input type="checkbox"/> Goods sold <input type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input checked="" type="checkbox"/> Other <i>Lease Rejection</i>			
2. Date debt was incurred: <i>11/10/2009</i>	3. If court judgment, date obtained: _____			
4. Classification of Claim. Check the appropriate box or boxes that best describe your claim and state the amount of the claim at the time case filed.				
Unsecured Nonpriority Claim <i>\$1,804,842.10</i>	<input type="checkbox"/> Secured Claim <input type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff). <small>Brief Description of Collateral:</small> <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____			
<input type="checkbox"/> Check this box if: a) there is no collateral or lien securing your claim, or b) your claim exceeds the value of the property securing it, or if c) none or only part of your claim is entitled to priority.	<small>Value of Collateral: _____</small> <small>Amount of arrearage and other charges at time case filed included in secured claim, if any:</small> <input type="checkbox"/> Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(7) <input type="checkbox"/> Taxes or penalties owed to government entities - 11 U.S.C. § 507(a)(8) <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(____)			
<small>*Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.</small>				
5. Total Amount of Claim at Time Case Filed: <i>\$1,804,842.10</i>	\$0.00 (unsecured)	\$0.00 (secured)	\$0.00 (priority)	\$1,804,842.10 (Total)
<small>If all or part of your claim is secured or entitled to priority, also complete Item 5 or 7 below.</small>				
<input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.				
6. Credits The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.			This space is for Court Use Only	
7. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgements, mortgages, security agreements, and evidence or perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.				
8. Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self addressed envelope and a copy of this proof of claim.				
Date <i>4/10/2009</i>	Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any): <i>DON EMERICK, MGR.</i> <i>[Signature]</i>			
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571				

EXHIBIT A

ATTACHMENT TO PROOF OF CLAIM

In re: Circuit City Stores, Inc.
Case no. 08-35653 (U.S. Bankruptcy Court Eastern District of Virginia)
Claim of Citrus Park CC, LLC

General Description of Claim: Unsecured claim based upon Rejection of Lease

Description of Lease: Circuit City Store No 3269 located at 6918 Gunn Highway, Citrus Park (Tampa) Florida

Dated of Lease: January 10, 2003

Term of Lease: January 10, 2003 to January 31, 2023

Lessor (by assignment dated July 8, 2003): Citrus Park CC, LLC (Florida)

Tenant: Circuit City Stores, Inc.

Fixed annual rent: \$580,320.00

Average monthly rent: \$48,360.00

Additions to rent: Ad Valorum taxes, insurance and utilities

Statutory Basis of Claim: 11 USC § 502 (g)

Date of Filing of Petition under 11 USC – Chapter 11: November 10, 2008

Date of return of premises to lessor: March 10, 2009

Elements of unsecured claim

Pre-petition portion (rent and taxes only)

Unpaid rent on Petition Date: \$64,318.80 (October 1, 2008 to Petition date)
Accrued Ad Valorem Taxes: \$97,532.30* (Tax year 2008) – Tax bill attached as Ex. A.

(continued on following page)

Rejection portion:

Remain term in months as of petition date: 170.67 months
Fifteen percent of remaining term: 25.6 months
Rent for 25.6 months: \$1,238,016.00

General unsecured damages estimated under § 502 (c):

Bank late charges related to lessor failure to timely made rent payment: \$1,445.46
Expenses related to retaking premises until re-renting[lease par. 20 (h)]:
Insurance: \$82,000.00 (24 months) **
Taxes: \$195,000.00 (24 months) **
Utilities: \$96,000.00 (24 months) **
Attorneys fees: \$25,000.00**
Cleanup: \$1,350.00
A/C Repair \$5,000.00*
Lock Change \$625.00

*Lessor intends to file a separate administrative claim for ad valorum taxes incurred by debtor during time of possession in Chapter 11 proceedings. This claim will be reduced by the amount actually recovered pursuant to the administrative claim.

**Estimated (if not marked then actual)

Summary of Claim

Prepetition:	\$ 161,851.10
Rejection:	\$1,238,016.00
Estimated:	\$ 404,975.00
Total:	\$1,804,842.10

Skip the Trip - Pay online at www.hillstax.org

- E-Check - A FREE electronic payment from your checking account
- Credit Card - 2.5% fee is charged

Payable amount	\$2,631.49	\$4,606.82	\$5,502.14	\$6,557.47	\$7,502.80
If postmarked by	Nov 30 09	Dec 31 09	Jan 31 09	Feb 28 09	Mar 31 09
Discount	4%	3%	2%	1%	None

CITRUS PARK CC LLC
C/O CIRCUIT CITY STORES INC - TAX DEPT
9950 MARYLAND DR 5TH FLOOR
RICHMOND VA 23233

Partial Legal Description: W 1/2 OF NW 1/4 OF SE 1/4 OF NE 1/4 LESS RR ROW AND LESS RW FOR GUNN HWY - E 65 FT OF W 50 FT OF ABANDONED RR LYINGS OF RW AND ABUTTING SAID TRACT OF W AND LESS RD RW BEG AT NE COR OF SAID TRACT

Ad Valorem Taxes

Tax District N

Taxing Authority	Telephone	Exemption	Taxable Value	Millage	Tax Amount	Assessed Value
COUNTY OPERATING	813-272-5890	0	4746611	5,743.90	27,284.06	4746611
ENVIRONMENTAL LAND	813-272-5890	0	4746611	0.08040	288.70	
COUNTY M.B.I.U.	813-272-5890	0	4746611	1,374.50	20,784.05	
LIBRARY SERVICE	813-272-5890	0	4746611	0.55650	2,601.10	
PARK BONDS - UNINCORPORATED	813-272-5890	0	4746611	0.02530	122.94	
SCHOOL - LOCAL	813-272-4047	0	4746611	2,473.00	11,788.37	
SCHOOL - STATE	813-272-4047	0	4746611	5,204.00	25,716.02	
PORT AUTHORITY	813-905-5132	0	4746611	0.19500	925.59	
HILLS CO TRANSIT AUTHORITY	813-623-5835	0	4746611	0.46820	2,222.38	
CHILDREN'S BOARD	813-223-2884	0	4746611	0.50000	2,373.31	
WATER MANAGEMENT	800-423-1476	0	4746611	0.38660	1,835.04	
WATER MANAGEMENT N	800-423-1476	0	4746611	0.24210	1,149.15	

Total Millage: 20.83190
Total Ad Valorem Taxes: \$9,547.52

CORRECTION NOTICE BC-1649 1/13/2009

Non-Ad Valorem Assessments

Authority	Purpose	Telephone	Amount	Total Non-Ad Valorem Assessments
STORMWATER MANAGEMENT	STORMWATER CONTROL	813-307-1827	\$16.13	1,026.18
COUNTY SOLID WASTE SW	SW DISPOSAL	813-272-5680	90.83	
COUNTY SOLID WASTE SWC	SW COLLECTION	813-272-5670	115.44	
Combined Taxes & Assessments:				\$7,542.60

Doug Belden, Hillsborough County Tax Collector

2008 Notice of Ad Valorem Taxes and Non-Ad Valorem Assessments

Folio Number	003571.0000	PM ID	3623631	TIN	U-11-28-17-222-000000-28070-0	Tax District	N	Escrow	Assessed Value	4746611
--------------	-------------	-------	---------	-----	-------------------------------	--------------	---	--------	----------------	---------

W 1/2 OF NW 1/4 OF SE 1/4 OF NE 1/4 LESS RR ROW AND LESS RW FOR GUNN HWY - E 65 FT OF W 50 FT OF ABANDONED RR LYINGS OF RW AND ABUTTING SAID TRACT OF W AND LESS RD RW BEG AT NE COR OF SAID TRACT INC

Pay online at www.hillstax.org. Partial payments are not accepted.

Payable amount	\$2,631.49	\$4,606.82	\$5,502.14	\$6,557.47	\$7,502.80
If postmarked by	Nov 30 09	Dec 27 09	Jan 31 09	Feb 28 09	Mar 31 09
Discount	4%	3%	2%	1%	None

CORRECTED NOTICE
BC-1649 1/13/2009
EXPIRED BY 1/31/09
REDACTED BY 2/19/2009

Make checks payable in US funds to:
DOUG BELDEN TAX COLLECTOR
P.O. BOX 172920
TAMPA FL 33672-0920

CITRUS PARK CC LLC
C/O CIRCUIT CITY STORES INC - TAX DEPT
9950 MARYLAND DR 5TH FLOOR
RICHMOND VA 23233

Exhibit A
Revised

TRANSFER OF CLAIM

KNOW ALL MEN BY THESE PRESENTS that for good and valuable consideration, the receipt of which is hereby acknowledged, the undersigned, Donald L. Emerick, Sr., the duly authorized agent and managing member of Citrus Park CC, LLC, a Florida limited liability company, First Party does hereby grant, assign and transfer to Donald L. Emerick, Sr., Second Party, all of First Party's right, title and interest in the following described Claim or Interest, a true copy as filed in the subject proceeding being attached to this Transfer of Claim:

Debtor: Circuit City Stores, Inc.

Case No.: 08-35653 U.S. Bankruptcy Court Eastern District of Virginia, Richmond Div.

Claim Number: 12218

Priority: Unsecured

Amount: \$1,804,842.10

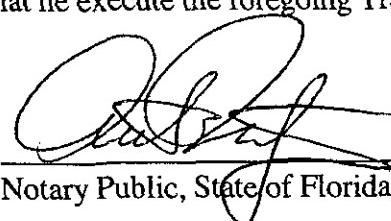
TOGETHER with all rights to payment of the claim transferred by these presents. This transfer is absolute and not for the purpose of security.

WITNESS my hand and seal this 30th day of October, 2009.


Donald L. Emerick, Sr.; FIRST PARTY

STATE OF FLORIDA }
COUNTY OF SARASOTA}

BEFORE ME, the undersigned authority, personally appeared Donald L. Emerick, Sr. being personally known by me or having produced WIA as identification and, who having been first duly sworn, freely acknowledged that he execute the foregoing Transfer of Claim for the purposes expressed therein.


Notary Public, State of Florida

ARTHUR S WEITZNER
Printed or typed name of notary



EXHIBIT B

LAW OFFICES

ARTHUR S. WEITZNER, P.A.

P.O. BOX 18028

SARASOTA, FLORIDA 34276

ARTHUR S. WEITZNER
CERTIFIED
BUSINESS BANKRUPTCY SPECIALIST

TEL: (941) 927-5471
FAX: (941) 927-5473
arthur@weitzner.com

October 31, 2009

Clerk, U.S. Bankruptcy Court
Eastern District of Virginia
701 East Broad Street
Richmond, VA 23219

EXPRESS MAIL

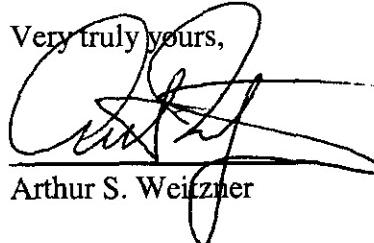
Re: Circuit City Stores, Inc. (CCS)
Case no. 08-35653 (U.S.B.C Eastern District of Virginia)
Matter: Request for Notice

Gentlemen:

The undersigned attorney represents Donald L. Emerick, Sr. a creditor of this estate by virtue of transfer of certain unpaid claims that have been previously timely filed in this proceeding. This transmittal concerns the entry of an eventual recognition of the substitute claimant. Enclosed are the following:

1. Request for Issuance of Notice of Transfer of Claim (claim no. 12218);
2. Request for Issuance of Notice of Transfer of Claim (claim no 13355).

Could you kindly docket these requests and serve the requisite notice? I do not believe a filing fee is required in regards to these two requests; however, if I am in error, kindly advise and the fee will be promptly transmitted. Furthermore, could you kindly date stamp and return a copy of this letter as a receipt for these filings. In this regard a self addressed envelope, postage prepaid, is enclosed for your convenience. Thanking you in advance for your courtesy, I remain.

Very truly yours,

Arthur S. Weitzner

Enc.
cc. w/enc. Donald L. Emerick, Sr.
ASW/aw